

CHARITON COURIER,

A. C. VANDIVER PROPRIETOR.

KEYTESVILLE, MISSOURI.

Prognosis and Diagnosis.

(This paper was read before the Chariton County Medical Society by G. M. Dewey, M. D. The society request its publication in the county papers. A copy could not be furnished to all the papers for this issue. If the other papers will copy from the Courier it will be satisfactory to the society.)

"The first thought of the physician on entering the sick room is, what is the matter?"

The treatment and prognosis will depend on the diagnosis.

Hence we see that diagnosis is of first importance in the treatment of disease.

The physician who is a failure in diagnosis will be a failure in practice.

We are constantly seeking for pathognomonic signs of disease.

A correct diagnosis is the pathognomonic sign of the true physician.

The ability to diagnose is the measure of a doctor's capacity to practice medicine.

It is this that distinguishes the wise from the fools in the profession. The ability to diagnose is not an acquired talent, neither is it altogether innate.

If diagnosis were an acquired talent, doctors would all stand on a par. They all read about the same books. They all go through about the same curriculum. They can all look into the books and see what are the symptoms of worms, itch and fits, and see what is the remedy.

Still, it is a well established fact that doctors of equal learning possess very different power or skill in differentiating disease.

Whether this faculty should be called common sense or genius I am unable to say. Knowledge is, of course, essential in making a diagnosis. No amount of "genius" can supply the want of knowledge.

Skill in diagnosis is a more essential trait in a physician than gray hairs or a bald pate, more essential than a cue or gold-headed cane, more essential than an oily tongue, a stove-pipe hat or royal liverie. Airs, dignity and style may go for much with the ignorant laity, but they get no credit from the profession.

I believe I may say that physicians respect each other just in proportion to their supposed skill in diagnosis, and such I may say is true among the upper class of the laity. I am aware that diagnostic acumen is of little value to a doctor whose constituents are fools.

An idiotic laity base their appreciation of a doctor's skill on the length of his prescriptions, largeness of dose and frequency of repetition. In practicing medicine forty years I have learned to always take the measure of every new patient on the first visit.

For a man of brains much good advice and little physic will do. To a fool give horse doses without dition.

While I declare diagnosis to be the most important matter relating to the practice of medicine, I am free to admit it to be the most difficult. If the rules laid down in the books for diagnosing disease could always be implicitly followed, then diagnosis would be no very difficult matter, but complications are quite common, and they are notorious for obscuring the diagnosis.

Medicine is not an exact science. There are but few diseases that have signs and symptoms so constant that mistakes cannot be made. Diseases of the abdominal cavity are more obscure than any other part of the body. Diseases of the chest are more common and more easily diagnosed than in any other cavity. A doctor well posted in anatomy and physiology, in auscultation and percussion, will make few mistakes in chest abnormalities.

The great Sir Spencer Wells, whom the world considers the best diagnostician of abdominal tumors, has, on cutting into the abdomen, found he had made a false diagnosis.

Nearly all great surgeons have recorded mistakes made in diagnosing diseases here. I doubt not the unrecorded ones would swell the list very much.

My friend Moorman informs me, that while he was in New York, a woman came to the hospital with an abdominal tumor that puzzled all the hospital staff, except Dr. Janeway, who thought it a floating kidney. A laparotomy confirmed his diagnosis. The kidney was removed and it proved to be the only one she had. The woman died of uremic coma in a few days.

If we, as physicians, are required to make the diagnosis, we should be allowed an autopsy in all obscure and doubtful cases. This is usually denied us, especially among the lower class, who have great horror of mutilating the dead, but none for murdering the living.

People who believe in ghosts never consent to autopsies. Why object to autopsy, when they know the bodies of their friends will hardly be cold in the grave, ere worms will hold high carnival in their brains and moonlight picnics in their hearts?

Much of the professed horror of an autopsy is hypocritical. I remember a patient whom I failed to cure, whose disease I could not make out, and was therefore very anxious to have an autopsy. I therefore

asked the dead man's wife for permission to hold one. Her sadness was changed to wrath. She called me a brute, a barbarian, a ghoul, in fact, everything bad, except a dude. Well, ten days from that day this widow's sorrows suddenly changed to joy. In the charms of a live husband she forgot the dead one.

Another case that came under my observation, was that of a woman who died rather unexpectedly under my treatment, whose case I could not satisfactorily diagnose. I requested an autopsy. The husband who looked sad before, now looked as though his chance of marrying again was desperate. He said I would break his heart. But it didn't break, or if it did it was soon repaired, (just as broken widowers' hearts always are.) The next time I saw him he had on his head the widow's sign that his wife was "winging with the angels," (and that he was in the market) to-wit, a white hat with a broad black band.

Before the next moon a widow with six children had soothed his sorrows, if she had not lightened his cares. A medical college could get his dead wife's body now for the asking.

I would parenthetically remark that I do not wish to insinuate that matrimony was instituted to repair or mend the broken hearts of widows and widowers, still its usefulness in this direction cannot be ignored. The white hat and black band enable us to kill two birds with one stone. This rig is as significant of matrimonial longings as of a deceased "frau." Men of much observation ought not to make a mistake in diagnosis here.

The costly fashionable drapery of a widow is not expected nor intended to act like a yellow flag in small-pox.

'Tis very plain what widows mean. When all bedecked in crepe duchene. Whoever mistakes this for a danger sign is a failure in diagnosis.

This advertisement belongs in the column of wants, not in the obituary. That objections to autopsies are begotten of ignorance is the historical fact that post mortems were made on Webster, Garfield, Agassiz, Byron, Bonaparte, Gambetta and so on. Who ever heard of an autopsy on a dead Indian?

Down to the day of Harvey doctors were all quacks. We would have remained such to this day had the prejudice against dissections continued.

Our legislators have finally discovered that a knowledge of anatomy (the foundation of medical knowledge) could not be acquired without dissections and have passed what is known as the "anatomy act."

By this act men and women who were ciphers in life became benefactors in death. It is our province to shape public opinion in matters pertaining to medicine.

Have we not the same right to shape public opinion in medicine as the statesman has in politics, or the clergy in divinity?

We admire, ye love our patients who get well, while we detest those that die; still it is not malice that instigates us to hold autopsies on them.

Gentlemen, you are aware that our patrons expect us to be able to make a diagnosis on the first visit. It is our duty to disabuse their minds on that subject, and to frankly state what we do and what we do not know about the case.

Some doctors will kick at this proposition and say the patient might become alarmed and send for another physician. I doubt not this would frequently occur, and some idiot would come who would make a diagnosis by the time he got to the door, if not before he left his office.

Does any intelligent doctor covet a constituency of idiots? Who would not rather be a tin or book peddler, than a truckler to fools. A man who would do it should have been born a eunuch.

Some doctors make up in idiotic dignity what they lack in wisdom. They are never at loss on diagnosis. Their patients are always afflicted with one of three diseases. They have either typho-malarial fever, biliousness or congestion. One of these blankets will always cover their ignorance, and camolom and quinine will do for treatment. It is hard to say which is the most detestable trait in a doctor, blarney or dumbness.

As a rule, men and women who don't talk, don't know anything to talk about. If the old adage, that, "A still tongue indicates a wise head," is true in the laity, it is a lie in the doctor.

The woman who would discharge her physician because he could not make a positive diagnosis on the first visit, ought to have been born down in Georgia, not to "gouber" peas, but that Battey might render her powerless in furthering a race of fools.

All the silent doctors of my acquaintance are brainless. Their silence is of ignorance begot, The falling speech is from the falling thought.

Quite unpossessed of either tongue or pen. We should infer they are but wooden men.

A non-communicative doctor has one advantage over one who talks, he will always pass with fools for more than he is worth. I knew a doctor of this description. He belonged to no medical society. He kept his own counsel, as we say. He boasted of not having read a medical book for twenty years. He had what the laity considers infallible signs of wisdom, to-wit: silver locks and a great abundance of intestines. Well

a lady in the neighborhood fancied she had some dire disease in that region where doctors go blind in diagnosis, and sent for this egotistical non-society, non-communicative M. D. His diagnosis was of course "liver complaint" (congestion.) His treatment, blue pills to salivation and a fly blister 16x16. This failure to diagnose the liver was repeated, when lo! an addition was made to the census. This episode entirely exonerated the liver.

Why doctors who are short on diagnosis always assault the liver, I am not prepared to say, unless it is that liver complaint is popular with the laity. If I were to take a specialty, it would be liver complaint, worms or rhinology. A snoot doctor has the advantage of big pay, much display and the patients will always be on hand. Besides a snotty nose is easier to diagnose than worms.

It's mighty hard for all of us To say a child is venemous.

Ignorant old women are the only persons of sufficient skill to diagnose worms.

It will not be expected that the scope of this paper will allow of a different diagnosis being made of all the maladies that beset us. I will, however, take occasion to say that doctors are at sea in an equinoctial storm without rudder or compass, when they undertake to differentiate between typhoid and a so called typho-malarial fever. The writers who have undertaken this job are utterly at variance on every characteristic evidence. One declares there are no rose spots in the typho-malarial fever, another says they are often present.

Some say pyrexia glands are not ulcerated. Another always found this lesion, and so on of all the landmarks.

A distinction without a difference is the haven of fools.

Latterly the more intelligent portion of the profession have abandoned the medical founding, unpossessed of record or pedigree. A few fools cling to it, imagining its shrine indicates quinine, abstaining from which they will be in an impenetrable fog.

At the late meeting of the "Association of American Physicians," Dr. Atkins, of Baltimore, read a paper on forms of typhoid fever, simulating remittent malarial fever. He said, "Malarial fever complicates typhoid fever, but it often happens that it is assumed unjustifiably." A mental bias in favor of malaria is often strongly pronounced in the face of the strongest contrary evidence.

"Quinine given in this disease, unless in sufficient doses to produce a certain degree of collapse, is useless. I believe it does nothing more than to increase the discomfort of the patient." The silly men of the profession say they must give the quinine to make the diagnosis. An undiscovered diagnosis would do the patient far less harm than forty grains of quinine.

The Prince of Wales has just recovered from an attack of typhoid fever. His physician in chief, was Sir Wm. Gull, who declares he gave him only five doses of medicine during his entire illness. This he says somewhat boastfully, as though the treatment was original. On reading his statement I at first thought of charging him with the grossest plagiarism, believing he had been reading some of tirades against medicine, especially quinine in typhoid fever.

But on further thought concluded "great minds always run in the same channel." What a lucky day for the prince, when he fell into the hands of knighted Gull. Suppose he had employed some ignorant, short-sighted, pug-nosed country galoot. The diagnosis would have been "malaria typhoid." Think of the potions and capsules that would have gone down his royal bengal gullet.

There are some animals and some men who are proof against argument. Some doctors are very much like a mule. Suppose I had a mule which was in the habit of using his hind legs to the detriment of all who came within his reach, and I therefore read to him a paper on the impropriety of this practice. I might quote authorities, statistics and autopsies on assenines who had come to death by this practice. I might talk to him in the enchanting strains of the whippoorwill or the soft notes of the turtle-dove, still the probabilities are the mule will continue to kick.

No soothing speech, no calm appeals could stay the fleetness of his heels.

I suppose all professions are destined to furnish their quota of fools. The medical profession are prepared to "ante" on demand.

The pathognomonic sign of an among doctors is ignorance and confidence in drugs.

But while urging the importance of a correct diagnosis, I do not forget that it is unimportant to a rut doctor; he would give camolom and quinine—the disease what it may.

I am aware it is the popular belief that it takes very little brains to make a doctor. Proof of this can be furnished on short notice. You can always tell a man's mental caliber if you know his doctor. A sensible man has a horror of being drugged by a fool. The doctor whose practice is only on wise men will never get rich; still, he should be content, as money cannot make a wise man happy.

After this seeming digression from the subject of this paper, I will now consider the other leg of the essay.

Prognosis in grave diseases is of no slight importance. It floats the rags of hope, or tells the knell of despair.

Does longer lease of life portend, Or are they yrrging to the end? Few patients are so beastly as to be indifferent on this subject.

The prognosis must be declared from the diagnosis. Its gravity must depend on a variety of conditions, and cannot be positively predicted except in malignant diseases. The question is constantly being presented to us, shall we, when the prognosis is grave or fatal, flatly state it to the patient. I unhesitatingly say, yes. I say yes, in the face of cowardice and tradition. In a practice of more than forty years I have followed this course and have yet to see the first instance where any bad result followed. The depressing influence produced upon the patient from a knowledge of his fate, is more imaginary than real. I doubt much whether all medical history can furnish one single instance of death being caused by nervous shock, produced on the patient from being informed he was near the end. People and doctors who believe a fatal prognosis coming to a patient's knowledge has shortened his life, have learned to believe it alone from a tradition born of ignorance, and not from any observed facts. We have arrived at an age when tradition must succumb to facts—to truth in medicine and divinity. Gray hairs and bald pates have ceased to be authority, when unsupported by observation and reason.

In prognosis, some doctors affect great conservatism and silence, a silence begotten of ignorance. He who is silent in diagnosis is a mummy in prognosis.

Knowledge of an incurable malady cannot aggravate its malignity nor hasten its progress. Inflammations have a definite course to run whatever the patient may know or not know.

A bad stomach influences the result in typhoid fever far more than the patient's fears.

He who is approaching his end has an indefeasible right to know it. Final settlements are to be made with God and man.

Secrets in prognosis as I said before, are the offspring of ignorance. He is a lucky doctor who can palm off reticency for wisdom on the ignorant public.

To prognosticate with an approach of certainty, requires accurate knowledge of the course and tendency of a disease, and the condition of a patient. One need not study medicine to predict that cancer and consumption will end in death sooner or later, nor that recovery may be expected from toothache, mumps and itch.

If hiding a patient's doom from him is detestable, eternally foreboding evil is execrable. Some men seem to think God spends all his time inventing afflictions for man.

To flatter a patient to his face and doom him to his back is demonic. In conclusion I will say, if doubt inheres to diagnosis, if uncertainty clings to prognosis, if medicine is an exact science, still I admire the M. D. who sees nature in disease. I adore the D. D. who sees God beyond sect."

Mother's "Semiles are the Sunlight of Home."

There would be fewer clouds and brighter sunshine in many households if every dispirited suffering woman realized what a boom Dr. Pierce's "Favorite Prescription" is for all weaknesses and maladies to which her sex is liable. No lady who gives this wonderful remedy a trial will be disappointed by the result. It not only acts promptly upon all functional derangements, but by its rare nerve and tonic properties strengthens and repairs the whole feminine system. Price reduced to one dollar. By Druggist.

Take Your Home Paper.

The Rural World has often urged farmers to take their home papers, and not only take, but patronized in the way of advertising if they have anything to sell or want to buy anything. A local paper circulates among a community, the members of which are generally known to all. If a farmer has a cow or horse to sell, or wants to buy a bunch of calves or some pigs, a notice inserted in the local paper at a cost of a dollar, perhaps, will make his wants known and bring him what he desires without trouble, or the expenditure of 'perps, days of time in hunting for it.

Not only will a farmer and his family get many times the cost of a local paper to him directly, but he will be benefited indirectly by its circulation in his community, whether he takes it or not, hundred of times more than the subscription. Nothing gives so much for so little as a good paper, and the local paper are not the least in this by any means.

Excitement in Texas.

Great excitement has been caused in the vicinity of Harris, Tex., by the remarkable recovery of Mr. J. E. Corley, who was so helpless he could not be nursed, or raised his head; everybody said he was dying of Consumption. A trial bottle of Dr. King's New Discovery was sent him. Finding relief, he brought a large bottle and a box of Dr. King's New Life Pills; by the time he had taken two boxes of Pills and two bottles of the Discovery, he as well and had gained in flesh thirty-six pounds. Trial Bottle of this Great Discovery for Consumption free at W. C. Gaston & Co. Large Bottles \$1.20

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We doubt not that most of the readers of the Rural World also have their own home paper, for our readers are of that intelligent class who would not fail to appreciate one of their best friends. But if there are any who have been remiss in this matter, we hope that the next time they go to town they will not forget to go in and see the editor and make amends for past omissions. The editor will also, if requested, club his paper with the Rural World, and furnish the two at a price so low that any farmer who would not take them must be a terribly poor farmer or a pretty, mean one. Rural World.

MISSOURI is showing to the world this year that she is one of the greatest countries on this continent. Her crops, matured and growing, are unsurpassed on the continent, perhaps not on the globe. Some fears were entertained in the past week that so much rain would greatly damage wheat that was still standing in the shock. This danger was obviated by the beautiful weather the early part of this week which started the stackers and threshers again. Should the favorable weather continue through the present week the entire crop of wheat, with the oats will be saved. The corn crop is immense. This is the report that comes from all parts of the state. The acreage in tobacco is much below an average this year; it will probably reach half, (some claim two-thirds) of a crop in Chariton county. This will be all the better for the producer as there has been an over-production for years past; consequently prices had dropped almost below the actual cost of production. Meadows, owing to dry weather in April, will not produce an average yield, still there will be an abundance of hay. The harvest is now ready, but owing to rains and pressure of other work but little grass has been cut yet.

A GIFT.—Go to Martin & Applegate druggists, Keytesville, and get a bottle FREE of the Great South American Nerve Tonic and Stomach and Liver Cure. It is by all odds the most powerful and astonishing cure for disease, all forms of weakness and failing health ever imported into North America. This cures when everything else fails.

READ TESTIMONIAL BELOW

Ed. J. Brown, druggist, of Edina, Mo., writes: "My health had been very poor for years. I only weighed 110 pounds when I commenced using 'Nervine Tonic.' I have used two bottles and now weigh 130 pounds, and am much stronger and better than he has been for 5 years. My customers see what it has done for me and buy it eagerly. It gives great satisfaction. 6-1-y

Missouri At The Top.

CHICAGO, ILL., July 3.—The following crop summary will appear in this week's issue of the Farmers' Review: "Reports on the yield of the winter wheat crop are now coming in and thus far corroborate our previous statements as to the shortage that might be expected. Missouri leads in her average and is followed by Illinois, while the other states have the following relative positions—Kentucky, Michigan, Indiana, Ohio and lastly Kansas, where the chinch bugs have done very serious damage. The reports on the average yield of the winter wheat crop are just beginning to come in, but the following from the different states probably furnishes a correct indication of the final results of the harvest: Twelve counties in Illinois report an average of seventeen bushels, and four counties place the average condition of the crop at 78 per cent; nine counties in Indiana place the average at fourteen bushels, and three counties the average condition at 70 per cent. Several counties in Michigan report an average yield of fifteen bushels; eleven counties in Ohio report a yield of thirteen bushels, while five counties report the condition at 85 per cent; the yield in twelve Missouri counties is eighteen bushels, and the condition in three is 108 per cent; five counties in Kentucky place the yield at sixteen bushels; in Kansas nine counties report an average yield of eleven bushels and five an average condition of 55 per cent. Seventeen counties in Illinois complain of damage to crops by drought. Like complaints come from six counties in Indiana and thirteen Kansas counties report damage from insects and drought. Rain is needed in Kentucky and Wisconsin, and six Missouri counties complain of damage by drought."

CONSTITUTION

Is called the "Father of Diseases," because there is no medium through which disease so often attacks the system as by the absorption of poisonous gases in the retention of decaying effluvia in the stomach and bowels. It is caused by a Torpid Liver, not in the bowels, as Nature's own cathartic, and generally accompanied with such results as

Loss of Appetite, Sick Headache, Bad Breath, etc.

The treatment of Constipation does not consist merely in evacuating the bowels. The medicine must not only act as a purgative, but also as a tonic, and produce after its use greater calmness, vigor, and a regular habit of body without changing the diet or disorganizing the system.

Take only the Genuine, Which has on the wrapper the red Trade-mark and Signature of J. H. ZEILIN & CO.

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It is pleasant to the taste, tones up the system, restores and preserves health. It is purely Vegetable, and cannot fail to prove beneficial, both to old and young. A Good Blood Purifier. It is superior to all others. Sold everywhere at \$1.00 a bottle.

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THE BEST CURE FOR Coughs, Croup, Whooping Cough, Asthma, Indigestion, Nervous Prostration, etc. It is a powerful tonic and restorative, and is the best remedy for all the above complaints. It is sold by all druggists and storekeepers.

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TRIED IN THE CRUCIBLE.

About twenty years ago I discovered a little mole on my cheek, and the doctors pronounced it cancer. I have tried a number of physicians, but without receiving any permanent benefit. Among the number were one or two specialists. The medicine they applied was like fire to the sore, causing intense pain. I saw a statement in the papers telling what S. S. S. had done for others similarly afflicted. I procured some at once. Before I had used the second bottle the neighbors could notice that my cancer was healing up. My general health had been bad for two or three years—I had a hacking cough and spit blood continually. I saw a severe pain in my breast. After taking six bottles of S. S. S. my cough left, and I grew stronger than I had been for several years. My cancer has healed over all but a little spot about the size of a pin's head, and is rapidly disappearing. I would advise every one with cancer to give S. S. S. a fair trial.

Feb. 16, 189